2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020421

Entity Name: THE MEDICAL IMAGING PROFESSIONALS, LLC

FILED Jan 18, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1000 WATERMAN WAY RM 1409 TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 295 TAVARES, FL 32778 1000 WATERMAN WAY RM 1409 TAVARES, FL 32778

FEI Number: 35-2227227 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WITTENSTEIN, FRED S MD 1000 WATERMAN WAY RM 1409 TAVARES, FL 32778 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: WITTENSTEIN, FRED S M.D.
Address: 220 NEW GATE LOOP
City-St-Zip: HEATHROW, FL 32746

Title: MGR

Name: SIEGEL, MARC F M.D.
Address: 701 CLUB RIDGE CT.
City-St-Zip: LONGWOOD, FL 32779

Title: MGR

Name: SIMON, JONATHAN M M.D. Address: 1734 GREY STONE CT. City-St-Zip: LONGWOOD, FL 32779

Title: MGR

Name: KARLINSKY, PAUL R M.D. Address: 1527 ST. EDMUNDS PLACE City-St-Zip: HEATHROW, FL 32746

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: FRED S WITTENSTEIN DR 01/18/2011